

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 9319S-000570
Application Number 10/698,035		Filed October 30, 2003
For DISPLAY DEVICE AND ELECTRONIC APPARATUS		
Art Unit 2885	Examiner Sember, Thomas M	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$120.
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$_____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$_____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$_____

- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number \_\_\_\_\_. I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

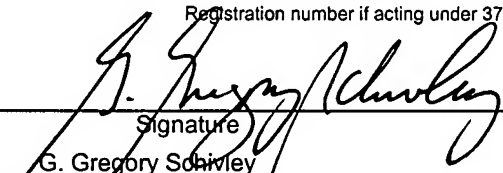
- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 27,382

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_.

  
\_\_\_\_\_  
Signature  
G. Gregory Schivley  
\_\_\_\_\_  
Typed or printed name

June 27, 2007

Date

06/28/2007 07:11 PM 00000044 10698035  
(248) 641-1600

01 FC-1251  
Telephone Number

120.00 0P

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2007</h2> <p style="font-size: small; margin: 5px 0;">Effective 2/8/2006. Patent fees are subject to annual revision.</p>		<p><b>Complete if Known</b></p>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number: 10/698,035 Filing Date: October 30, 2003 First Named Inventor: Yasunori Onishi Examiner Name: Sember, Thomas M Art Unit: 2885 Attorney Docket No.: 9319S-000570	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 130			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 08-0750 Deposit Account Name: Harness, Dickey & Pierce <p>The Director is authorized to: (check all that apply)  <input checked="" type="checkbox"/> Charge fee(s) indicated below   <input type="checkbox"/> Credit any overpayments  <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application  <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>	<h3>3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>120</td><td>2251</td><td>60</td><td>Extension for reply within first month</td><td>130</td></tr> <tr><td>1252</td><td>450</td><td>2252</td><td>225</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>1020</td><td>2253</td><td>510</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,590</td><td>2254</td><td>795</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,160</td><td>2255</td><td>1080</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>500</td><td>2401</td><td>250</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>500</td><td>2402</td><td>250</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>1000</td><td>2403</td><td>500</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1452</td><td>500</td><td>2452</td><td>250</td><td>Petition to revive - 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\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	G. Gregory Schivley	Registration No. (Attorney/Agent)	27,882
Signature		Telephone	248 641 1600
		Date	June 27, 2007

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

The PTO did not receive the following listed item(s): check in the amount of \$120.00